**Lymphatic Filariasis**

**Most current treatments**
involve mass drug administration (MDA) with albendazole, ivermectin, and diethylcarbamazine (DEC)

**Vector interventions**
can prevent mosquitoes from ingesting microfilariae from infected persons

1. Mosquito bites an infected person and ingests microfilariae
2. Microfilariae undergo multiple developmental stages in the mosquito to reach the infective L3 larval form
3. L3 larvae enter skin when mosquito bites another person
4. L3 larvae develop into adult worms and lodge in lymphatic vessels
5. Adult worms lodged in lymphatic vessels cause dilation and blockage, resulting in lymphedema and hydrocele
6. Female worms produce large numbers of microfilariae
7. Microfilariae are then found in lymph and blood of infected persons

- Lymphedema
- Hydrocele

**Vector interventions** prevent mosquito from transmitting L3 larvae to other people.